CORPORATE OFFICE 1525 NE 36th Street Ankeny, IA 50021 515.964.9444 (Phone) 800.247.8013 (Toll Free) 515.964.7813 (FAX)



GEORGIA OFFICE P.O. Box 2127 Valdosta, GA 31604-2127 229.244.3288 (Phone) 229.244.5841 (FAX)

FED-X

October 27, 2010

Document Processing Desk (DCI/PRD)
Mr. Russell Wasem, Chemical Review Manager
Pesticide Re-evaluation Division (7508P)
Office of Pesticide Programs
U.S. Environmental Protection Agency
2775 South Crystal Drive.
Arlington, VA 22202

RE:

Imidacloprid Registration Review Data Call In

90-Day Response

Dear Mr. Wasem,

The enclosed submission is Albaugh's 90-Day Response to the Agency's October 8, 2010 Registration Review Data Call-In for Imidacloprid.

As noted by the enclosed requirements Status and Registrant's Response form Albaugh has made an offer to cost share to the other registrants listed in the DCI.

Please call if you have any questions.

Regards,

Morris Gaskins Registrations Manager

Albaugh, Inc.

229-244-3288





CORPORATE OFFICE 1525 NE 36th Street Ankeny, IA 50021 515.964.9444 (Phone) 800.247.8013 (Toll Free) 515.964.7813 (FAX)

ALBAUGH, INC.

GEORGIA OFFICE P.O. Box 2127 Valdosta, GA 31604-2127 229.244.3288 (Phone) 229.244.5841 (FAX)

FED-X

November 22, 2010

Document Processing Desk (DCI/PRD) Mr. Russell Wasem, Chemical Review Manager Pesticide Re-evaluation Division (7508P) Office of Pesticide Programs U.S. Environmental Protection Agency 2775 South Crystal Drive. Arlington, VA 22202

RE:

Imidacloprid Registration Review Data Call In (Amended)

90-Day Response

Dear Mr. Wasem,

The enclosed submission is Albaugh's 90-Day Response to the Agency's revised Registration Review Data Call-In for Imidacloprid dated November 10, 2010

As noted by the enclosed requirements Status and Registrant's Response form Albaugh has made an offer to cost share to the other registrants listed in the DCI.

Please call if you have any questions.

Regards,

Morris Gaskins

Registrations Manager

Albaugh, Inc. 229-244-3288





United States Environmental Protection Agency Washington, D.C. 20460

OMB Approval 2070-0174

OMB Approval 2070-0107 OMB Approval 2070-0057

11. Phone Number (229) 274-3288

10. Name of Company

| | | D | ATA CALL-IN | RESPONSE | | | | | |
|---|---|--|--|--|---|---|--|--|--|
| INSTRUCTIONS: Please Use additional sheet(s) if | | se read carefully t | he attached instruction | ons and supply the information request | ted on this form. | | | | |
| Company Name and Address ALBAUGH INC 1525 NE 36TH STREET ANKENY, IA 50021 | | | Case # and Nan Chemical # and Imidacloprid | ne Name 129099 | 10-Nov-2010 GENERIC | MITA WICENE TOTALISMA | | | |
| 4. EPA Product Registration | 5. I wish to cancel this product regis- tration volun- tarily | Data Exem obtain the a from the so | lata laiming a Generic option because I active ingredient ource EPA regisorer listed below. | 6b. I agree to satisfy Generic Data requirements as indicated on the attached form entitled "Requirements Status and Registrant's Response." | 7. Product Specific Data 7a. My product is an MUP and I agree to satisfy the MUP requirements on the attached form entitled "Requirements Status and Registrant's Response." | 7b. My product is an EUP and I agree to satisfy the EUP requirements on the attached form entitled "Requirements Status and Registrant's Response." | | | |
| 42750-104 42750-114 42750-119 | | | | | N.A. N.A. N.A. | N.A. N.A. N.A. | | | |
| knowingly false or mislead Signature and Title of Cor | | | all attachments are to the prisonment or both | rue, accurate, and complete I acknow under applicable law. | wedge that any 9. Date | 1/22/2010 | | | |

S for L name?

United States Environmental Protection Agency Washington, D.C. 20460

OMB Approval 2070-0174

OMB Approval 2070-0107 OMB Approval 2070-0057

REQUIREMENTS STATUS AND REGISTRANT'S RESPONSE

| 1. Company Name and ALBAUGH INC 1525 NE 36TH S ANKENY, IA 50 | TREET PROPERTY | Chemical # and Name Imidacloprid | | 129 | 099 | | | 10-N GEN | and Type of DCI and lov-2010 IERIC RR-129099-3016 | | |
|---|---|---|--------|---------|------------------|---|---|-------------|--|------------------------------|---------------------------|
| 4. Guideline Requirement Number | 5. Study Title | No. 7 | PROTOC | Pr R | ogres: eports | S | 6. Use Pattern | 33896 656 | Fest stance | 8. Time Frame (Months) | 9. Registrant Response |
| | | | O L | 1 | 2 | 3 | | | | | |
| Name of the last | Environmental Fate Data Requirements Chemical) | (Conventional | | | | H | TEST SUE | H | | | |
| 835.4300 | Aerobic aquatic metabolism | 2 1 10 4 U - 24 2 1 1 2 5 A | | | | | H, R, U, BB, I, K, II, (A, B, C, J, T, S | Q, TGA | l or PAIRA | 24 | 3 |
| 2 | Nontarget Plant Protection Data Require Chemical) | ements (Conventional | | | | | THE RESERVE | 13 | | | THE PARTY |
| 850.4100 | Terrestrial plant toxicity, Tier 1 (seeding er | mergence) (5,10) | | | | | H, R, U, BB, I, K, II, (A, B, C, J, T, S | Q, TEP | | 12 | 3 |
| 850.4150 | Terrestrial plant toxicity, Tier 1 (vegetative | vigor) (3 ,11 ,12) | | | | | H, R, U, BB, I, K, II, (A, B, C, J, T, S | Q, TEP | | 12 | 3 |
| 850.4400 | Aquatic plant toxicity test using Lemna spi and II | p. Tiers I (4) | | | | | H, R, U, BB, I, K, II, (A, B, C, J, T, S | Q, TEP | or TGAI | 12 | 3 |
| | Post-Application Exposure Data Require Chemical) | ements (Conventional | | | | | | | | | 100 |
| 875.2300 | Indoor surface residue dissipation | (1, 13, 14) | | | | | H, R, U, BB, I, K, II, (A, B, C, J, T, S | Q, TEP | | 12 | 3 |
| | Terrestrial and Aquatic Nontarget Organ Requirements (Conventional Chemical) | nisms Data | | | | | | | | | |
| 350.3040 | Field testing for pollinators | (2 ,15) | | | | | H, R, U, BB, I, K, II, G A, B, C, J, T, S | Q, TEP | | 24 | 3 |
| | Toxicology Data Requirements (Conver | ntional Chemical) | | | | | | 3 | | | |
| 370.7800 | Immunotoxicity | | | | | | H, R, U, BB, I, K, II, (A, B, C, J, T, S | Q, TGA | ı | 12 | 3 |
| | tify that the statements made on this form and a ading statement may be punishable by fine on the company's Authorized Representative | all attachments are true, a prisonment or both under a band h , L | | _ | | | ete. I acknowledge that Porris Gaskes Is Trations | Mar | Date // B. Phone Number / | /22/ | 2010 |

United States Environmental Protection Agency Washington, D.C. 20460

OMB Approval 2070-0174

OMB Approval 2070-0107 OMB Approval 2070-0057

REQUIREMENTS STATUS AND REGISTRANT'S RESPONSE

| INSTRUCTIONS: Please type or print in ink. Please read carefully the attached instructions and supply the information requested on this form. Use additional sheet(s) if necessary. | | | | | | | | | | | |
|--|--|---|-------------|---------------------|---|----------|--|--|--------------------------------------|--|--|
| 1. Company Name and Address ALBAUGH INC 1525 NE 36TH STREET ANKENY, IA 50021. | | Case # and Name Chemical # and Name Imidacloprid | 129099 | | | | | 3. Date and Type of DCI and Number 10-Nov-2010 GENERIC ID# RR-129099-30160 | | | |
| Guideline Requirement Number | 5. Study Title | | P R O T O C | Progress Reports | | ss ts | 6. Use Pattern | 7. Test Substance | 8. Time Frame (Months) | 9. Registrant Response | |
| | | | OL | 1 | 2 | 3 | | | | | |
| Special Study | Residue Analysis of Nectar and Polle Crops | en in Flowering (7 ,8 ,9 ,17) | | | | | H, R, U, BB, I, K, II, C A, B, C, J, T, S | Ω, TEP | 48 | 3 | |
| Special Study | Seed Leaching Study Using TEP | (6,16) | | H | | 1 | H, R, U, BB, I, K, II, C A, B, C, J, T, S | Q, TEP | 12 | 3 | |
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| Initial to indicate certific (full text of certification | cation as to information on this page is on page one). | 14/ contravely | À | | 3 | 3 | Me | Date 11/2 | 2/10 | or all the end and and and and and and and and and a | |



United States Environmental Protection Agency Washington, D.C. 20460 CERTIFICATION OF ATTEMPT TO ENTER INTO AN

CERTIFICATION OF ATTEMPT TO ENTER INTO AN AGREEMENT WITH REGISTRANTS FOR DEVELOPMENT OF DATA

Form Approved.

OMB Nos. 2070-0057; 2070-0107; 2070-0122; 2070-0164

Paperwork Reduction Act Notice: The public reporting burden for this collection of information is estimated to average 15 minutes per response including time for reading the instructions, searching existing data sources, gathering and maintaining the data needed and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden to: Director, Collection Strategies Division (2822T), U.S. Environmental Protection Agency, 1200 Pennsylvania Avenue, N.W., Washington, DC 20460. Do not send the form to this address.

| N.W., Washington, DC 20460. Do not send the form to this address. | | | | | | |
|--|--------------------------|--|--|--|--|--|
| Please fill in blanks below | | | | | | |
| Company Name | Company Number | | | | | |
| Albaugh, Inc. | 42750 | | | | | |
| Chemical Name | EPA Chemical Number | | | | | |
| Imidacloprid | 129099 | | | | | |
| I Certify that: | | | | | | |
| My company is willing to develop and submit the data required by EPA under the authority Rodenticide and Fungicide Act (FIFRA), if necessary. However, my company would prefe with one or more registrants to develop jointly or share in the cost of developing data. | | | | | | |
| My firm has offered in writing to enter into such an agreement. That offer was irrevocable bound by arbitration under section 3(c)(2)(B)(iii) of FIFRA if final agreement on all terms of otherwise. This offer was made to the following firm(s) on the following date(s): | | | | | | |
| Name of Firm(s) | Date of Offer | | | | | |
| Bayer Enviro, Lanxess Corp., Celsius Property, United Phosphorus, Nufarm, Nufarm Americas, Bayer Cropscience, Hebei Veyong, Advan, Amtide, Control Solutions, Rotam, Source Dynamics, Sharda Worldwide, Ensystex III | | | | | | |
| Certification: | \$11.25 | | | | | |
| I certify that I am duly authorized to represent the company name above, and that the stat this form and all attachments therein are true, accurate and complete. I acknowledge that misleading statement may be punishable by fine or imprisonment or both under applicable | t any knowingly false or | | | | | |
| Signature of Company's Authorized Representative | Date | | | | | |
| 14/2 Jts | 11/22/2010 | | | | | |
| Name and Title (Please Print or Type) | | | | | | |
| Morris Gaskins Registrations Manager | | | | | | |